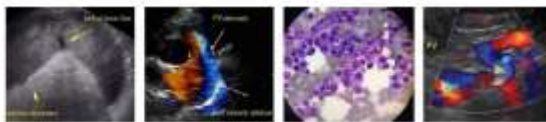




PATIENT	PRESENTING CLINICAL SIGNS
Rosie Wilson	Previous C section. Needs to be spayed but found elevated ALT on presurgical bloodwork. 4DX negative. ALT 1386(10-125)
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	<i>Urinary System</i> The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths, sediment, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.
BREED	
French Bulldog	
SEX	The area of the aortic trifurcation was free of pathology.
FI	No overt pathology was noted in the area of the uterus or bilateral ovaries.
AGE	Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 4.9 cm in length. The right kidney measured 5.0 cm in length.
6 years	
WEIGHT	<i>Adrenal Glands</i> The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.5 cm length x 0.76 cm width at the caudal pole. The right adrenal gland was indistinctly visualized owing to regional periadrenal artifact, yet without overt pathology subjectively measuring 1.9 cm length x 0.6 cm width at the caudal pole.
12.4 kg	
INTERPRETED BY	
R. McKenzie Daniel, DVM, DABVP	
IMAGING PERFORMED BY	<i>Spleen</i> The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.
Crystal Hill	
HOSPITAL NAME	<i>Liver/ Gallbladder</i> The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. Normal hepatoportal vascular volume was present. No signs of congestion were noted. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
Grand River VH	
REFERRING VET	
Dr. Chu	
INVOICE	<i>Gastrointestinal</i> The visualized stomach walls were sonographically unremarkable. The lumen of the stomach contained moderate, primarily echogenic ingesta with mild progressive distal acoustic shadowing.
12440	
DATE	
10/25/21	



PATIENT

Rosie Wilson

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

SPECIES

Canine

Pancreas

The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.

BREED

French Bulldog

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

SEX

FI

ULTRASONOGRAPHIC FINDINGS

Primary Findings

AGE

6 years

- Hepatopathy - subjectively benign
- Gastric ingesta - probable post prandial presentation

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

12.4 kg

No overt evidence of structural hepatic pathology, as well as no overt evidence of intrahepatic / extra-hepatic shunt. Inflammatory parenchymal or hepatobiliary process (immune-mediated, infectious, or other), with potential for portal hypoplasia / microvascular dysplasia, may be possible. Hepatic functionality is likely normal, assuming normal BUN, glucose, albumin, and cholesterol levels. Core or surgical biopsy is required for a definitive diagnosis and may be considered at the time of ovariohysterectomy. Empirically, hepatosupportive medications such as Denamarin, Ursodiol, or Vitamin E may prove beneficial.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING

PERFORMED BY

Crystal Hill

HOSPITAL NAME

Grand River VH

REFERRING VET

Dr. Chu

INVOICE

12440

DATE

10/25/21





PATIENT

Rosie Wilson

SPECIES

Canine

BREED

French Bulldog

SEX

FI

AGE

6 years

WEIGHT

12.4 kg

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP

IMAGING PERFORMED BY

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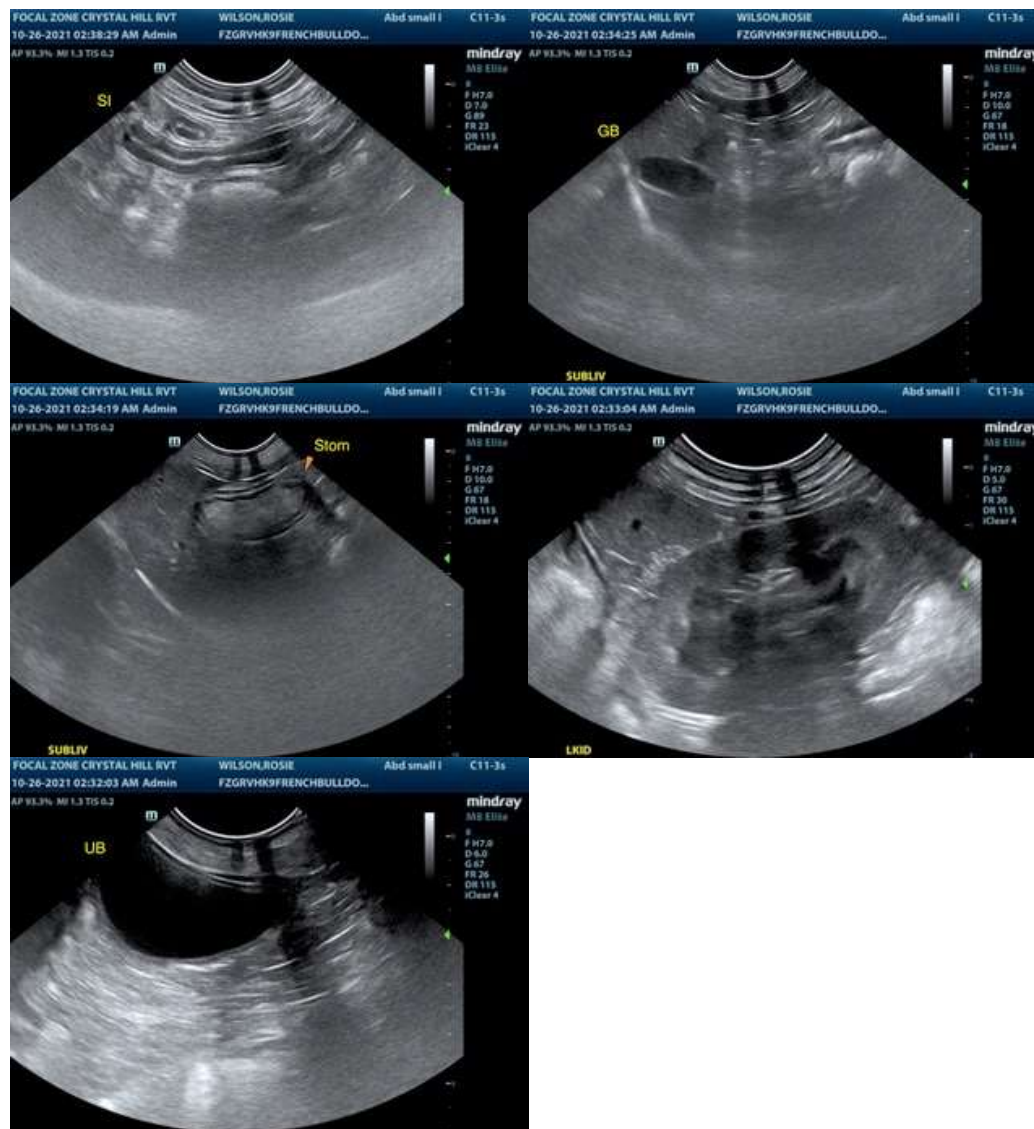
Dr. Chu

INVOICE

12440

DATE

10/25/21



The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com